

Physiotherapy & corset

Physiotherapy

The goal of physiotherapy is to counteract the further contortion of the spine three-dimensionally with exercises thereby also making the spine stable, and keeping it so, by building up muscles. The best known forms of treatment are:

- Physiotherapy using the Katharina Schroth method
- Vojta therapy
- Spiral dynamics

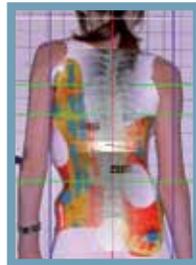
i An experienced physiotherapist will then create an individual training program for the patient, which he/she can perform at home.

Corset

The aim of a corset is to prevent scoliosis or kyphosis advancing and the need for an operation. The corset is prescribed by an orthopaedic doctor once the spine has a certain angle and is to be worn for several hours a day until the child has stopped growing. The change of the spine will be checked regularly.



Patient with an x-ray image



Patient with corset

i The success of corset therapy is not just dependent on the quality of the corset, but also on the age and acceptance of the patient.

Did you know...?

→ In Germany approx. 700,000 people suffer from scoliosis.

→ Girls are affected four times more often by scoliosis than boys.



→ 70 % of schoolchildren already have bad posture ...

70 %

They spend around 50–90 hours per week sitting down, e.g. at school, doing their homework, watching TV, on the bus and train, in front of the computer, playing computer games etc.

→ 80 % of randomly examined school bags ...

80 %

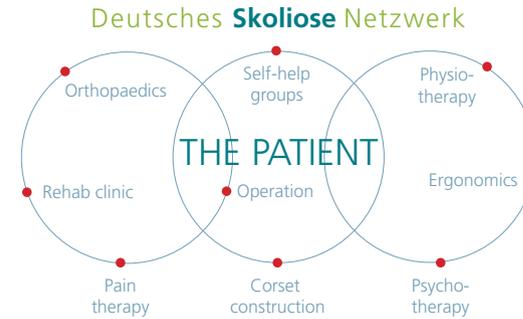
... were packed incorrectly or were too heavy.

→ Many young people only (!) do sports for 2 to 3 hours per week.



The founders of this organisation...

... are also affected by scoliosis, but are able to work without restrictions and in different fields of expertise to help people in a similar position – in cooperation with doctors, physiotherapists, pain therapists, clinics, corset construction technicians, rehab centres and other associated organisations.



Other important topics on the website:

- Non-operative and operative treatment options
- pelvic obliquity and differences in leg length
- treatment and rehab measures, medicine and medical appliances
- biomechanical posture and movement analysis
- scoliosis and sport, scoliosis and temporomandibular joint
- scoliosis self-help groups

Excursions & Seminars

Information, help & contact details



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Scoliosis

... when the spine gets contorted.



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→ Early recognition of posture damage in children and young people



Free information
Hotline
02 28 -
88 60 906

Dear parents and teachers, children and young people.

You can do something to help the health of your child's back right now. If deficits, weaknesses or irregularities in the body posture are detected and recognised early, the outlook for successful treatment is much better.

Scoliosis is normally not noticed by people suffering from it in the early stages, because it doesn't cause any complaints or pain. Coordination problems and an asymmetric posture are the first easy to overlook signs, which are often seen as "normal" as part of bad posture habits. However, the older the child gets, the more difficult it is to correct the defective posture.

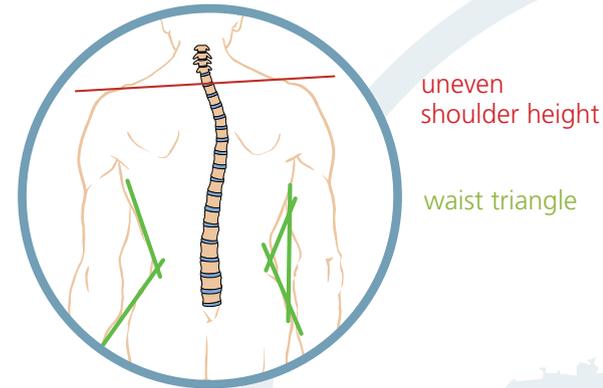
The earlier a defective posture is detected, although in particular the side curvature of the spine, the so-called scoliosis (scolios = crooked), the more successful and mild the treatment promises to be. What is a permanent and complex problem in adult life may be able to be corrected in childhood.

i The early recognition of a malposition of the spinal column is particularly important while your child is growing.

Leaning test for early detection.

The first indication aid, even for non-medical people, is a general visual examination:

- Does the spine look abnormal?
- Is one shoulder higher than the other?
- Is the pelvis straight or is one side lower than the other?
- Is one waste triangle bigger than the other?



Leaning test

The leaning test in 4 steps:

1. The child bends his/her naked torso over until the fingertips touch the floor.
2. By observing the shoulders you can see whether the shoulder and the shoulder blades are at the same height on both sides of the spine.
3. If one half of the back looks particularly flat and the other is particularly high, i.e. curves upwards, there is a suspicion that the spine is contorted and therefore that scoliosis exists.
4. We will help you find an experienced doctor, therapist or clinic in your area.



Rib hump

What is scoliosis?

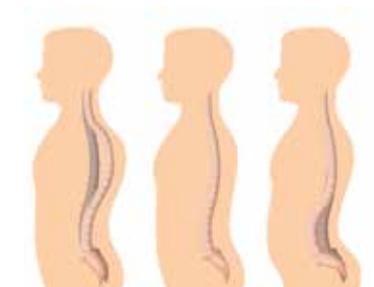
Scoliosis is a side curvature of the spine with the simultaneous twisting of the spine.

The spine does not just curve to the side, but also shows a rotation of the spine as well as an axial contortion of the shoulder girdle to the pelvis. Once the development has begun, it continues and in adult life can have many side-effects such as disorders of the heart, lung and other vital functions and additional pain.

The cause

There has not been much research done about the cause of scoliosis. It is suspected that hormonal, nervous or muscular disorders could be the triggers. A hereditary predisposition can also have an effect on it. Scoliosis normally occurs in times of strong spinal growth and is detected between the age of 9 and 12. Girls are four times as likely to be affected as boys.

Whether treatment is necessary or not depends on the one hand on how crooked the spine is and on the other hand on how fast the contortion is advancing.



Kyphosis Normal Lordosis